



HR0279

LRB098 11752 GRL 44754 r

1

HOUSE RESOLUTION

2 WHEREAS, Behavioral healthcare disparities exist across
3 Illinois; these disparities include underserved populations
4 with behavioral healthcare needs as one of their acute or
5 chronic conditions; and

6 WHEREAS, Behavioral healthcare disparities include racial,
7 ethnic, and rural behavioral health disparities and
8 underserved or professional shortage areas; and

9 WHEREAS, The mental well-being of young people and their
10 ability to not use alcohol or other drugs is strongly linked to
11 their academic success; helping students stay healthy is a
12 fundamental mission of schools; and

13 WHEREAS, According to the United States Surgeon General,
14 approximately 50% of children with emotional disturbances and
15 behavioral disturbances drop out of school; and

16 WHEREAS, According to the Centers for Disease Control,
17 suicides are among the leading cause of death for people 15-54
18 years of age; and

19 WHEREAS, County coroners in Illinois report that, in some
20 counties, the suicide rate has doubled since 2002, while, in

1 other counties, the suicide rate has increased in recent years;
2 and

3 WHEREAS, According to the Department of Defense Annual
4 Suicide Report, suicides in the military started climbing
5 considerably in 2005; this trend has not abated in recent
6 years; and

7 WHEREAS, Cook County Jail is the largest "mental
8 institution" in the State, due to its active inpatient
9 psychiatric population; there are over 1,700 people on
10 psychotropic medication for treatment of bipolar disorder,
11 clinical depression, and schizoaffective disorder in the jail;
12 and

13 WHEREAS, In Cook County Jail, 80% of the women there have a
14 chronic mental illness; 80% of the women in that jail are the
15 sole caretakers of their children; and

16 WHEREAS, Illinois courts, municipal and county jails, and
17 the juvenile justice system have direct contact with many
18 individuals who could be diverted away from these systems if
19 behavioral healthcare services were available to them;
20 therefore, be it

21 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE

1 NINETY-EIGHTH GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that
2 we urge the Governor to seek to empower and engage individuals
3 and communities where behavioral healthcare disparities exist
4 through the use of incentives, education, outreach,
5 technology, and innovation; and be it further

6 RESOLVED, That we further urge the administration to work
7 with the 98th General Assembly to establish Behavioral
8 Healthcare Enterprise Zones (BHEZs); BHEZs, modeled after
9 economic enterprise zones, should be established in areas with
10 significant behavioral health disparities, poor access to
11 behavioral healthcare, high rates of trauma, or acute or
12 chronic behavioral healthcare illnesses; primary care
13 physicians and behavioral healthcare clinicians should be
14 encouraged to practice in BHEZs through a range of incentives,
15 including loan repayment assistance, tax credits, and
16 assistance in installing health information technology; and be
17 it further

18 RESOLVED, That we further urge the administration to
19 establish Behavioral Healthcare Loan Repayment Assistance
20 initiatives, in which behavioral healthcare professionals
21 would be encouraged to practice through a range of incentives
22 to include loan repayment assistance; the initiatives should
23 include eligibility requirements, in which clinicians would
24 have to participate in the Medicaid program and meet voluntary

1 standards for community service; community-based organizations
2 should be urged to apply to create the zones and proposals with
3 matching funding should be given priority; and be it further

4 RESOLVED, That we further encourage the administration to
5 call on the Department of Human Services, in collaboration with
6 the Department of Healthcare and Family Services, to identify a
7 method to establish pilot programs for health homes, systems of
8 care, and essential community behavioral healthcare providers
9 to address the racial, ethnic, and rural behavioral health
10 disparities, underserved populations, and underserved areas or
11 professional shortage designated areas; and be it further

12 RESOLVED, That we further encourage the administration to
13 include a standardized collection and analysis of data on the
14 impact on racial, ethnic, and rural healthcare disparities,
15 underserved populations, and underserved or professional
16 shortage designated areas in the Department of Human Services
17 data collection process; and be it further

18 RESOLVED, That we further encourage the administration to
19 create an Illinois Behavioral Health Innovation Prize that
20 would provide public recognition for a new intervention or
21 program that successfully reduces or eliminates behavioral
22 healthcare disparities; the prize should broaden the scope of
23 community participation and discover new solutions that can be

1 duplicated and employed throughout the State; and be it further

2 RESOLVED, That suitable copies of this resolution be
3 delivered to Governor Pat Quinn and the Secretary of the
4 Department of Human Services.